

1744
JFW

I 133 (00050.084500.)

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: T.T. Snider
DANIEL J. PLANKENHORN)
: Group Art Unit: 1744
Application No.: 10/079,843)
:
Filed: February 22, 2002)
:
For: CLEANING APPARATUS WITH) June 10, 2004
CONTINUOUS ACTION)
WIPING AND SWEEPING)

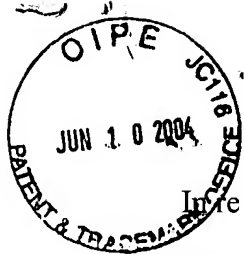
MAIL STOP AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated March 10, 2004, please enter the following amendments and consider the following remarks.



In re Application of:

Attorney Docket No.: J-3133
(00050.084500)

DANIEL J. PLANKENHORN

Appln. No.: 10/079,843

Examiner: T.T. Snider

Filed: February 22, 2002

Group Art Unit: 1744

For: CLEANING APPARATUS WITH
CONTINUOUS ACTION
WIPING AND SWEEPING

Date: June 10, 2004

MAIL STOP AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

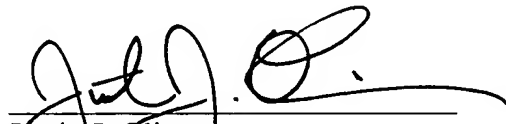
The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	73	MINUS	73	0	x \$9 \$18	\$ 0
INDEP. CLAIMS	5	MINUS	5	0	x \$43 \$86	\$ 0
Fee for Multiple Dependent Claims \$145/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$ 0.00 is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.

- ☒ Any prior general authorization to charge an issue fee under 37 CFR 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Extension fee for response within one month is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to the address given below for S.C. Johnson & Son, Inc.

Respectfully submitted,


Justin J. Oliver
Registration No. 44,986
Attorney for Applicant

S.C. JOHNSON & SON, INC.
Attn: Frank McDonald
Patent Section, M.S. 077
1525 Howe Street
Racine, Wisconsin 53403
Telephone: (262) 260-2000
Facsimile: (262) 260-4253

Fitzpatrick, Cella, Harper & Scinto
1900 K Street, N.W., Suite 1000
Washington, DC 20006-1110
Facsimile: (202) 530-1055

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